

RECEIVED  
CENTRAL FAX CENTER

APR 28 2006

## FAX TRANSMISSION

DATE: April 28, 2006

PTO IDENTIFIER: Application Number 10/655,343-Conf. #6546  
Patent Number

Inventor: Theresa TSAI

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: BIRCH, STEWART, KOLASCH & BIRCH, LLP

Joe McKinney Muncy

PHONE: (703) 205-8026

Attorney Dkt. #: 2519-0227PUS1

PAGES (Including Cover Sheet): 13

CONTENTS: Fax Cover Shct (1 page)  
Certificate of Transmission (1 page)  
Petition for Revival (2 pages)  
Fee Transmittal (1 page)  
Reply to Restriction and Election of Species Requirement (3 pages)  
Transmittal (1 page)  
Revocation of Power of Attorney (2 pages)  
Certificate Showing Chain of Title (2 pages)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (703) 205-8026 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

BIRCH, STEWART, KOLASCH & BIRCH, LLP  
8110 Gatehouse Road, Suite 100 East, P.O. Box 747, Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 Facsimile: (703) 205-8050

PTO/SB/87 (08-04)

Approved for use through 07/31/2008. OMB 0551-0031

U. S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (If known): 10/655,343

Attorney Docket No.: 2519-0227PUS1

## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on April 28, 2006  
Date



Signature

Joe McKinney Muncy

Typed or printed name of person signing Certificate

32,334  
Registration Number, if applicable(703) 205-8026  
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Fax Cover Sheet (1 page)  
Certificate of Transmission (1 page)  
Petition for Revival (2 pages)  
Fee Transmittal (1 page)  
Reply to Restriction and Election of Species Requirement (3 pages)  
Transmittal (1 page)  
Revocation of Power of Attorney (2 pages)  
Certificate Showing Chain of Title (2 pages)

PTO/SB/21 (08-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

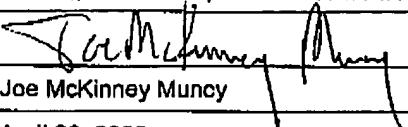
(to be used for all correspondence after initial filing)

		Application Number	10/655,343-Conf. #6546
		Filing Date	September 4, 2003
		First Named Inventor	Theresa TSAI
		Art Unit	1713
		Examiner Name	H. L. Pezzuto
Total Number of Pages in This Submission	5	Attorney Docket Number	2519-0227PUS1

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Certificate under 37 CFR 3.73(b) Showing Chain of Title
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	BIRCH, STEWART, KOLASCH & BIRCH, LLP		
Signature			
Printed name	Joe McKinney Muncy		
Date	April 28, 2006	Reg. No.	32,384